# 20-52042-mmp Doc#44 Filed 03/17/22 Entered 03/17/22 11:09:48 Main Document Pg 1 of

Fill in this info	rmation to identify your	case:		
Debtor 1	Danny Nevarez			
	First Name	Middle Name	Last Name	
Debtor 2	Evelyn Carina Ne	varez		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		WESTERN DISTRICT O	OF TEXAS	
Case number	20-52042			
(if known)				

Check if this is an amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

Pai	t 1: Summarize Your Assets		
		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	330,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	44,651.99
	1c. Copy line 63, Total of all property on Schedule A/B	\$	374,651.99
Pai	t 2: Summarize Your Liabilities		
			abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	452,055.74
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	3,879.58
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	18,195.00
	Your total liabilities	\$	474,130.32
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	6,621.50
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	6,621.50
Pai	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	edules.
	■ Yes What kind of debt do you have?		
7.			
7.	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or

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Debtor 1 **Danny Nevarez** 

Debtor 2 Evelyn Carina Nevarez Case number (if known) 20-52042

the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_5,007.02

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	3,764.74
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	3,764.74

Fill in this informat	tion to identify your case:	
Debtor 1	Danny Nevarez	
Debtor 2 (Spouse, if filing)	Evelyn Carina Nevarez	
United States Ban	skruptcy Court for the: WESTERN DISTRICT OF TEXAS	
Case number	20-52042	Check if this is:
(If known)		<ul><li>An amended filing</li><li>A supplement showing postpetition chapter</li></ul>
		13 income as of the following date:
Official Fo	<u>rm 106l</u>	MM / DD/ YYYY

#### Official Form 1061

#### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

. Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job,	Franciscon and adatus	■ Employed	■ Employed
attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
employers.	Occupation		Student
Include part-time, seasonal, or self-employed work.	Employer's name	Mosaic Human Capital Solutions LLC	
Occupation may include student or homemaker, if it applies.	Employer's address	85 NE Loop 410 San Antonio, TX 78216	
	How long employed the	nere? 02-2022	

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or

non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 0.00 2,437.50 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 +\$ 0.00 Calculate gross Income. Add line 2 + line 3. 2,437.50 \$ 0.00

Schedule I: Your Income Official Form 106I page 1

Debtor 1 Debtor 2	Danny Nevarez Evelyn Carina Nevarez	_	Case r	number ( <i>if known</i> )	20-52042		
			For	Debtor 1	For Debtor		
Co	py line 4 here	4.	\$	2,437.50	\$	0.00	
5. <b>Lis</b>	st all payroll deductions:						
5a	Tax, Medicare, and Social Security deductions	5a.	\$	430.21	\$	0.00	
5b		5b.	\$	0.00	\$	0.00	
5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
5d	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
5e		5e.	\$	0.00	\$	0.00	
5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
5g		5g.	\$	0.00	\$	0.00	
5h	' ' ===================================	5h.+	· —		+ \$	0.00	
6. <b>A</b> d	d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	430.21	\$	0.00	
7. <b>C</b> a	Iculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,007.29	\$	0.00	
8. <b>Lis</b> 8a	st all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
8b	•	8b.	\$	0.00	\$	0.00	
8c.	Family support payments that you, a non-filing spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	n <b>t</b> 8c.	\$	0.00	\$	0.00	
8d	• • •	8d.	\$	0.00	\$	0.00	
8e	•	8e.	\$	0.00	\$	0.00	
8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	ce 8f.	\$	0.00	\$	0.00	
8g		— 8g.	\$ 	0.00	\$	0.00	
8h		8h.+	\$		+ \$	0.00	
	Average GI Bill Income for Wife		\$	1,026.00	\$	0.00	
9. <b>A</b> d	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	4,614.21	\$	0.00	
				_	1	1 [_	
	Iculate monthly income. Add line 7 + line 9.	10.   \$_	- 6	<b>5,621.50</b> + \$_	0.00	= \$ 6	,621.50
	d the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.					]	
Inc oth Do	ate all other regular contributions to the expenses that you list in <i>Schedu</i> lude contributions from an unmarried partner, members of your household, you ler friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are no ecify:	ur depend	-				0.00
Wr	d the amount in the last column of line 10 to the amount in line 11. The relate that amount on the Summary of Schedules and Statistical Summary of Certains					\$6	,621.50
13. <b>D</b> o	you expect an increase or decrease within the year after you file this for	m?				Combined monthly in	
	No.						

Fill	in this info	ormation to identify yo	our case:					
Deb	tor 1	Danny Neva	r07			Ch	eck if this is:	
DCD	101 1	Dailing Neva	I EZ			- CI	An amended filing	n
Deb	tor 2	Evolun Carir	a Nova	.07				owing postpetition chapter
	ouse, if filing	Evelyn Carir	ia ivevai	<del>6</del> 2				of the following date:
(		<i>5)</i>					·	J
Unit	ed States B	Sankruptcy Court for the	: WEST	ERN DISTRICT OF TEXAS	<u> </u>		MM / DD / YYYY	
Cas	e number	20-52042						
(If kı	nown)							
$\bigcap$	fficial	Form 106J						
			Evno	neoe				40/45
		ıle J: Your			- CP			12/15
info	ormation.		eded, att	e. If two married people ar ach another sheet to this on.				
Par		escribe Your House	ehold					
1.		joint case?						
		So to line 2.						
	Yes.	Does Debtor 2 live	in a sepa	rate household?				
	I	No						
	[	☐ Yes. Debtor 2 mu:	st file Offic	cial Form 106J-2, <i>Expenses</i>	for Separate House	hold of De	ebtor 2.	
_	_		_					
2.	Do you	have dependents?	■ No					
	Do not li Debtor 2	st Debtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not s	tate the						□ No
		ents names.						☐ Yes
								□ No
								_ Yes
								□ No
								_ Pes
								□ No
_	D		_	_				_
3.	expense	expenses include es of people other t f and your depende	han <sub>r</sub>	No Yes				
Par		stimate Your Ongoi						
exp		of a date after the		ruptcy filing date unless y cy is filed. If this is a supp				
Incl	lude expe	enses paid for with	non-cash	government assistance i	f you know			
			d have in	cluded it on Schedule I: \	our Income		Your ex	nansas
(On	ficial Forr	n 1061.)					Tour ex	penses
4.		tal or home owners ts and any rent for th		nses for your residence. In or lot.	nclude first mortgage		\$	2,068.00
	If not in	cluded in line 4:						
	4a. Re	eal estate taxes				4a.	\$	0.00
		roperty, homeowner's	s, or rente	r's insurance		4b.		0.00
		ome maintenance, re				4c.	·	235.00
		omeowner's associa				4d.	\$	12.50
5	Addition	nal mortgage navm	onts for v	our residence such as ho	me equity loans	5		0.00

6a. 6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 17a. 17b. 17c. 17d.		500.00 0.00 0.00 325.00 200.00 70.00 20.00 98.00 800.00 125.00 213.00 350.00 100.00 0.00 0.00 0.00 0.00 0.00 0.
6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 15b. 15c. 15d. 16. 17a. 17b. 17c.		0.00 0.00 325.00 200.00 70.00 20.00 98.00 800.00 0.00 125.00 85.00 213.00 350.00 100.00 0.00 140.00 0.00 0.00 0.00
6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 15b. 15c. 15d. 16. 17a. 17b. 17c.		0.00 0.00 325.00 200.00 70.00 20.00 98.00 800.00 0.00 125.00 85.00 213.00 350.00 100.00 0.00 140.00 0.00 0.00 0.00
6c. 6d.  7. 8. 9. 10. 11. 12. 13. 14. 15b. 15c. 15d. 16. 17a. 17b. 17c.		0.00 325.00 200.00 70.00 20.00 98.00 800.00 0.00 125.00 85.00 213.00 350.00 100.00 0.00 140.00 0.00 0.00 600.00
6d.  7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 17a. 17b. 17c.		325.00 200.00 70.00 20.00 98.00 800.00 0.00 125.00 85.00 213.00 350.00 100.00 0.00 0.00 140.00 0.00 0.00 600.00
7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 17a. 17b. 17b. 17c.	\$	325.00 200.00 70.00 20.00 98.00 800.00 0.00 125.00 85.00 213.00 350.00 100.00 0.00 0.00 140.00 0.00 0.00 600.00
8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b. 17c.	**************************************	200.00 70.00 20.00 98.00 800.00 0.00 125.00 85.00 213.00 350.00 100.00 0.00 140.00 0.00 0.00 600.00
8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b. 17c.	\$	70.00 20.00 98.00 800.00 0.00 125.00 85.00 213.00 350.00 100.00 0.00 140.00 0.00 0.00 600.00
8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b. 17c.	\$	20.00 98.00 800.00 0.00 125.00 85.00 213.00 350.00 100.00 0.00 0.00 140.00 0.00 0.00 600.00 0.00
8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b. 17c.	\$	98.00 800.00 0.00 125.00 85.00 213.00 350.00 100.00 0.00 140.00 0.00 0.00 600.00
8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b. 17c.	\$	800.00 0.00 125.00 85.00 213.00 350.00 100.00 0.00 0.00 140.00 0.00 0.00 600.00 0.00
8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b. 17c.	\$	0.00 125.00 85.00 213.00 350.00 100.00 0.00 0.00 140.00 0.00 0.00 600.00 0.00
9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 17a. 17b. 17c.	\$	125.00 85.00 213.00 350.00 100.00 0.00 0.00 140.00 0.00 0.00 600.00 0.00
10. 11. 12. 13. 14. 15b. 15c. 15d. 16. 17a. 17b. 17c.	\$	85.00 213.00 350.00 100.00 0.00 0.00 140.00 0.00 0.00 600.00
11. 12. 13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b. 17c.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	213.00 350.00 100.00 0.00 0.00 140.00 0.00 0.00 600.00 0.00
12. 13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b. 17c.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	350.00 100.00 0.00 0.00 140.00 0.00 0.00 600.00
13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b. 17c.	\$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$	0.00 0.00 0.00 0.00 140.00 0.00 600.00
14. 15a. 15b. 15c. 15d. 16. 17a. 17b. 17c.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 140.00 0.00 600.00 0.00
14. 15a. 15b. 15c. 15d. 16. 17a. 17b. 17c.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 140.00 0.00 600.00 0.00
15a. 15b. 15c. 15d. 16. 17a. 17b. 17c.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 140.00 0.00 0.00 600.00
15b. 15c. 15d. 16. 17a. 17b. 17c.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 140.00 0.00 0.00 600.00 0.00
15b. 15c. 15d. 16. 17a. 17b. 17c.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 140.00 0.00 0.00 600.00 0.00
15c. 15d. 16. 17a. 17b. 17c.	\$	0.00 140.00 0.00 0.00 600.00 0.00
15c. 15d. 16. 17a. 17b. 17c.	\$	140.00 0.00 0.00 600.00 0.00
16. 17a. 17b. 17c.	\$ \$ \$	0.00 0.00 600.00 0.00
16. 17a. 17b. 17c.	\$ \$ \$	0.00 600.00 0.00
17a. 17b. 17c.	\$ \$ \$	600.00
17b. 17c.	\$	0.00
17b. 17c.	\$	0.00
17c.	\$	
	•	
17d.	·	V.V.
	\$	0.00
18.	\$	298.00
	\$	0.00
19.	-	
: I: Yo	ur Income.	
20a.	\$	0.00
20b.	\$	0.00
20c.	\$	0.00
20d.	\$	0.00
20e.	\$	0.00
21.	· -	185.00
	+\$	65.00
	+\$	72.00
	+\$	60.00
	ΤΨ	00.00
	\$	6,621.50
	\$	,
	s ———	6,621.50
		0,021.00
,		
23a.	\$	6,621.50
23b.	-\$	6,621.50
		•••
		0.00
23c.	\$	0.00
		ease or decrease because of a
	23b. 23c. le this	23a. \$ 23b\$ 23c. \$ le this form?

Fill in this info	rmation to identify your	case:		
Debtor 1	Danny Nevarez First Name	Middle Name	Last Name	
Debtor 2	Evelyn Carina Ne		Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
(Spouse II, IIIIng)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	WESTERN DISTRICT (	OF TEXAS	
Case number	20-52042			
(if known)				

Check if this is an amended filing

#### Official Form 106Dec

# **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below	
Di	id you pay or agree to pay someone who is N	T an attorney to help you fill out bankruptcy forms?
	No	
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice  Declaration, and Signature (Official Form 11:
	at they are true and correct.	the summary and schedules filed with this declaration and  X /s/ Evelyn Carina Nevarez
	13/ Daility Nevalez	
	Danny Nevarez	Evelyn Carina Nevarez

Fill in this info	rmation to identify your	case:		
Debtor 1	Danny Nevarez			
	First Name	Middle Name	Last Name	
Debtor 2	Evelyn Carina Ne	varez		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	WESTERN DISTRICT (	OF TEXAS	
Case number	20-52042			
(if known)				

#### Official Form 108

# Statement of Intention for Individuals Filing Under Chapter 7

12/15

Check if this is an amended filing

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1	of Schedule D: Creditors \	Who Have Claims Secu	red by Property (0	Official Form 106D)	, fill in the
information below					

Creditor's   Mr. Cooper   Surrender the property as exempt on Schedule C?    Creditor's   Mr. Cooper   Surrender the property   Surrender the property as exempt on Schedule C?    Creditor's   Mr. Cooper   Surrender the property   Retain the property and redeem it.   Retain the property and enter into a Reaffirmation Agreement.   Retain the property and [explain]:   Property   Retain the property and [explain]:   No   Property   Surrender the property and enter into a Reaffirmation Agreement.   Retain the property and [explain]:   No   Property   Surrender the property   No   Retain the property and redeem it.   Retain the property and redeem it.   Retain the property and enter into a Reaffirmation Agreement.   Retain the property and enter into a Reaffirmation Agreement.   Retain the property and [explain]:   Property   Retain the property and [explain]:   Property   Property	iiiioiiiiatioii beio	***			
Description of property	Identify the creditor and the property that is collateral			, , , , , ,	
name:  Description of property  110,891 miles  Description of property  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and enter into a Reaffirmation Agreement.	name:  Description of property securing debt:	370 Private Road 234 Hondo, TX 78861 Medina County Legal Description: A1463 H. E. & W. T. RR. SURVEY 131; TRACT 48; 28.56 ACRES	<ul> <li>Retain the property and redeem it.</li> <li>Retain the property and enter into a Reaffirmation Agreement.</li> </ul>	 □ No	
property 110,891 miles   Retain the property and [explain]:	name:	•	☐ Retain the property and redeem it.  ■ Retain the property and enter into a		
	property	110,891 miles	_		

#### Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Official Form 108

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Debtor 1 Debtor 2		Case number (if known) <b>20-52042</b>
Describ	e your unexpired personal property leases	Will the lease be assumed?
Lessor's		□ No
Property	ion of leased :	☐ Yes
Lessor's	name: ion of leased	□ No
Property		☐ Yes
Lessor's	name: ion of leased	□ No
Property		☐ Yes
Lessor's	name: ion of leased	□ No
Property		☐ Yes
Lessor's	name: ion of leased	□ No
Property		☐ Yes
Lessor's	name: ion of leased	□ No
Property		☐ Yes
Lessor's	name: ion of leased	□ No
Property		☐ Yes
Part 3:	Sign Below	
Under pe	enalty of perjury, I declare that I have indicated my intention	on about any property of my estate that secures a debt and any personal
χ <u>/s/</u>	Danny Nevarez	χ /s/ Evelyn Carina Nevarez
	nny Nevarez nature of Debtor 1	Evelyn Carina Nevarez Signature of Debtor 2
Dat	March 16, 2022	Date March 16, 2022

Fill in this information to identify your case:						
Debtor 1	Danny Nevarez					
Debtor 2 (Spouse, if filing)	Evelyn Carina Nevarez					
United States Bankruptcy Court for the: Western District of Texas						
Case number (if known)	20-52042					

Check one box only as directed in this form and in Form 122A-1Supp:

- 1. There is no presumption of abuse
- 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.

Column B

Debtor 2 or

Check if this is an amended filing

#### Official Form 122A - 1

# Chapter 7 Statement of Your Current Monthly Income

04/20

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

#### Part 1: Calculate Your Current Monthly Income

- 1. What is your marital and filing status? Check one only.
  - Not married. Fill out Column A, lines 2-11.
  - Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
  - ☐ Married and your spouse is NOT filing with you. You and your spouse are:
  - Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
  - □ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).

Column A

**Debtor 1** 

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

					non-fili	ng spouse
2.	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and commissi	ons (before all	\$ 0.00	\$	0.00
3.	<b>Alimony and maintenance payments.</b> Do not include Column B is filled in.	payments from	a spouse if	\$ 0.00	\$	0.00
4.	All amounts from any source which are regularly partial of you or your dependents, including child support from an unmarried partner, members of your household and roommates. Include regular contributions from a spilled in. Do not include payments you listed on line 3.	. Include regula d, your depende	r contributions ents, parents, lumn B is not	\$ 0.00	\$	0.00
5.	Net income from operating a business, profession,	or farm				
		Del	otor 1			
	Gross receipts (before all deductions)	\$ 0.00				
	Ordinary and necessary operating expenses	-\$ 0.00	-			
	Net monthly income from a business, profession, or far	m \$ 0.00	Copy here ->	\$ 0.00	\$	0.00
6.	Net income from rental and other real property					
		Del	otor 1			
	Gross receipts (before all deductions)	\$ 0.00				
	Ordinary and necessary operating expenses	-\$ 0.00	-			
	Net monthly income from rental or other real property	\$ 0.00	Copy here ->	\$ 0.00	\$	0.00
7.	Interest, dividends, and royalties		-	\$ 0.00	\$	0.00

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Unemployment compensation  Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you  For your spouse  S  0.00  Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.  S  Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19): payments received cleared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19): payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.  Long Term Disability Income  S  Total amounts from separate pages, if any.  Long Term Disability Income  Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the form  Calculate the median family income for this part of the form  Calculate the median family income for your state and size of househo	umber ( <i>if known</i> )	20-52042	
Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:  For you \$ 0.00  For your spouse \$ 0.00  Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.  Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed servicies. If necessary, list other sources on a separate page and put the total below.  Long Term Disability Income  \$		Column B Debtor 2 or non-filing s	
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Total amounts from separate pages, if any.  Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  5,007.02  Determine Whether the Means Test Applies to You  Calculate your current monthly income for the year. Follow these steps:  12a. Copy your total current monthly income from line 11  Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the form  Calculate the median family income that applies to you. Follow these steps:  Fill in the state in which you live.  TX  Fill in the median family income for your state and size of household.  To find a list of applicable median income amounts, go online using the link specified in the set for this form. This list may also be available at the bankruptcy clerk's office.  How do the lines compare?  14a.  Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There Go to Part 3. Do NOT fill out or file Official Form 122A-2.  14b.  Line 12b is more than line 13. On the top of page 1, check box 2, The presumption			
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<ul> <li>Line 12b is less than or equal to line 13. On the top of page 1, check box 1, <i>There</i> Go to Part 3. Do NOT fill out or file Official Form 122A-2.</li> <li>Line 12b is more than line 13. On the top of page 1, check box 2, <i>The presumption</i></li> </ul>	eparate instruc	13. etions	\$70,418.00
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· · ·	e is no presum	nption of abuse	Э.
	on of abuse is	determined by	Form 122A-2.
3: Sign Below			
By signing here, I declare under penalty of perjury that the information on this statement a	and in any atta	achments is tru	ue and correct.
X /s/ Danny Nevarez X /s/ Evelyn Carii	Na		

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Debtor 1 Debtor 2	Danny Nevarez Evelyn Carina Nevarez		Case number (if known)	20-52042
	Danny Nevarez Signature of Debtor 1		<b>Evelyn Carina Nevarez</b> Signature of Debtor 2	
Dat	March 16, 2022 MM / DD / YYYY	Date	March 16, 2022 MM / DD / YYYY	
	If you checked line 14a, do NOT fill out or file Form 122A-2.			
	If you checked line 14b, fill out Form 122A-2 and file it with this t	orm.		

Debtor 1 Debtor 2 Danny Nevarez Evelyn Carina Nevarez Case number (if known) 20-52042

### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 06/01/2020 to 11/30/2020.

Line 9 - Pension and retirement income

Source of Income: VA Income

Constant income of \$3,492.09 per month.

Line 10 - Income from all other sources

Source of Income: Long Term Disability Income

Constant income of \$1,514.93 per month.

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B2030 (Form 2030) (12/15)

## United States Bankruptcy Court Western District of Texas

In	Danny Nevarez re Evelyn Carina Nevarez		Case No.	20-52042
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPENSATION (	OF ATTORNEY	FOR DEBTOR	(S) - AMENDED
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I compensation paid to me within one year before the filing of the be rendered on behalf of the debtor(s) in contemplation of or in	ne petition in bankruptcy	, or agreed to be paid	to me, for services rendered or to
				1,800.00
	Prior to the filing of this statement I have received		<b>\$</b>	1,800.00
	Balance Due		\$	0.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed compensation	on with any other person	unless they are memb	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation vecopy of the agreement, together with a list of the names of			
5.	In return for the above-disclosed fee, I have agreed to render le	egal service for all aspec	ts of the bankruptcy c	ase, including:
	<ul><li>a. Analysis of the debtor's financial situation, and rendering as</li><li>b. Preparation and filing of any petition, schedules, statement</li><li>c. Representation of the debtor at the meeting of creditors and</li></ul>	of affairs and plan which	n may be required;	
	d. [Other provisions as needed]  Negotiations with secured creditors to reduce reaffirmation agreements and applications as 522(f)(2)(A) for avoidance of liens on households.	needed; preparation		
6.	By agreement with the debtor(s), the above-disclosed fee does Representation of the debtors in any dischargany other adversary proceeding.	not include the following	g service: cial lien avoidance	es, relief from stay actions or
	CE	RTIFICATION		
this	I certify that the foregoing is a complete statement of any agrees bankruptcy proceeding.	ement or arrangement for	payment to me for re	epresentation of the debtor(s) in
	March 16, 2022	/s/ J. Robert Van	hemelrijck	
	Date	J. Robert Vanher	melrijck 24056468	
		Signature of Attorna Vanhemelrijck La		
		2001 NW Military		
		San Antonio, TX (210) 804-1529   F	78213 Fax: (210) 598-6359	1
		jrv @vanlaws.cor	· · ·	
		Name of law firm		